DECLARATION FOR PATENT APPLICATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to $\ensuremath{\mathsf{my}}$ name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHODS TO FACILITATE AN EXCHANGE OF INFORMATION ASSOCIATED WITH MEDICAL CARE PROVIDED TO A PATIENT

<u>X</u> is a wa	tion of which (chec attached hereto. s filed on as amended on	k one): as Application Seria (if applicat	al No. ole)			
I herel identified spe referred to ab	ecification, including	reviewed and understand the g the claims, as amended by a	contents of the above ny amendment			
I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.						
119 of any fo have also ide	reign application(s entified below any f	ority benefits under Title 35, U) for patent or inventor's certifioreign application for patent of oreign application for patent of the application on which pric	cate listed below and inventor's certificate			
PRIOR FOREIGN APPLICATION(S)			Priority claimed			
(Number)	(Country)	(Day/month/year filed)	Yes No			
(Number)	(Country)	(Day/month/year filed)	Yes No	_		
I hereby claim the benefits under Title 35, United States Code, § 120 of any						

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United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing date) (paten	(Status) nted,pending,abandoned)	
(Application Serial No.)	(Filing date)	(Status)	
	(paten	nted,pending,abandoned)	

<u>Power of Attorney</u>: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith

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Elsa Keller Legal Administrator (732) 321-3026

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both,

Address:

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under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of sole inventor:	Catherine Britton
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